

10/12 U.S. PTO

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.: **CM06694H**First Inventor: **Vidya Narayanan**Title: **METHOD FOR OPTIMIZED  
LOCAL ROUTING BETWEEN  
MOBILE NODES**Express Mail Label No.: **EU862208285US**

## APPLICATION ELEMENTS

(see MPEP chapter 600 concerning utility patent application contents)

Mail Stop Patent Application  
ADDRESS TO: Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status  
See 37 CFR 1.27
3. ☒ Specification [Total Pages 22 ]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or computer program listing appendix
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3 ]
5. Oath or Declaration [Total Sheets 4 ]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CFR)
  - b. ☐ Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-4 (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure ☐ 2 Copies of IDS  
Statement (IDS)/PT-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document
16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number 22917 or ☐ Correspondence address below

Name **MOTOROLA, INC.**Address **1303 E. Algonquin Road**City **Schaumburg**State **IL**Zip Code **60196**Country **USA**Telephone **(847) 576-6733**Fax **(847) 576-0721**Name **Valerie M. Davis**Registration No. **50,203**SIGNATURE **Valerie M. Davis**Date **February 18, 2004**

CM06694H

Patent fees are subject to annual revision

☐ Applicant claims small entity status. See 37 CFR 1.27

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Application Number	N/A
Filing Date	February 18, 2004
First Named Inventor	Vidya Narayanan
Examiner Name	N/A
Group Art Unit	N/A
Attorney Docket No.	CMN/A06694H

Attorney Docket No.	CMN/A06694H
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☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

Deposit Account Number	502117
Deposit Account Name	Motorola, Inc.

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

Large Entity	Small Entity
<p>1. <b>Identify the entity</b></p> <p>2. <b>Identify the entity's primary business activity</b></p> <p>3. <b>Identify the entity's primary business activity</b></p> <p>4. <b>Identify the entity's primary business activity</b></p> <p>5. <b>Identify the entity's primary business activity</b></p> <p>6. <b>Identify the entity's primary business activity</b></p> <p>7. <b>Identify the entity's primary business activity</b></p> <p>8. <b>Identify the entity's primary business activity</b></p> <p>9. <b>Identify the entity's primary business activity</b></p> <p>10. <b>Identify the entity's primary business activity</b></p>	<p>1. <b>Identify the entity</b></p> <p>2. <b>Identify the entity's primary business activity</b></p> <p>3. <b>Identify the entity's primary business activity</b></p> <p>4. <b>Identify the entity's primary business activity</b></p> <p>5. <b>Identify the entity's primary business activity</b></p> <p>6. <b>Identify the entity's primary business activity</b></p> <p>7. <b>Identify the entity's primary business activity</b></p> <p>8. <b>Identify the entity's primary business activity</b></p> <p>9. <b>Identify the entity's primary business activity</b></p> <p>10. <b>Identify the entity's primary business activity</b></p>

Other fee (specify)

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)		Fee Paid
1001	770	2001	385	Utility filing fee	X
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

	Previously Paid**	=	Extra Claims	X	Fee from below	=	Fee Paid
Total Claims	26	=	6	X	18	=	84.00
Independent Claims	4	=	1	X	86	=	86.00
			Multiple Dependent		290	=	0

Multiple Dependent 

290
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0
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Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	* Reissue independent claims over original patent
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent

**\*\*or number previously paid, if greater; For Reissues, see above.**

\* Reduced by Basic Filing Fee Paid

Name (Print/Type)	Valerje M. Davis
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Registration No.	50,203	Telephone	(847) 576-6733
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Valerie M. Davis  
Val M. Davis

Date	February 18, 2004
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